24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	C C00569905
	<u> </u>
Check if 24-hour report 48-hour report New report Amends report filed	d on M M / D D / Y Y Y Y Y
Full Name of Payee BIEBER COMMUNICATIONS	Date of Public Distribution/Dissemination 07 17 2015
Mailing Address 3609 W. MACARTHUR BLVD	
#812	Amount
City State Zip Code	3164.00
SANTA ANA CA 92704-6850	Transaction ID : SE24.1189 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - PRINTING Category/ Type 004	07 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
DD DEN CARCON	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For:
Full Name of Payee BIEBER COMMUNICATIONS	Date of Public Distribution/Dissemination
Mailing Address 3609 W. MACARTHUR BLVD	07 17 2015
#812	Amount
City State Zip Code	3164.00
SANTA ANA CA 92704-6850	Transaction ID : SE24.1190 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - PRINTING Category/ Type 004	07 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ee Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disb 2016	oursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	6328.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
24.0	01 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	